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Implementation of emergency clinical pathway for STEMI in the Lazio Region (Italy): results of a pilot study

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Background Timely reperfusion therapies (primary angioplasty and pre-hospital thrombolysis) remain a key component in improving the survival of patients with acute myocardial infarction with ST-segment elevation (STEMI). Lazio Region (Italy) emergency has a complex mixed logistic (the big city of Rome, presence of beaches and mountains); therefore, the use of telemedicine technologies is mandatory by the emergency medical system (EMS). Emergency Clinical Pathways (ECPs) for the management of STEMI patients were designed, focusing on early pre-hospital diagnosis and best appropriate treatment through the ECG transmission and teleconsultation among EMS and cardiologists in coronary care units (CCUs).

Objective To evaluate the trail of introducing the ECP-STEMI in the current practice of EMS personnel.

Methods A prospective observational cohort study of ambulance-transported patients with chest pain was conducted in a selected area of Lazio region during a six-month period. The implementation of the ECP was carried out by educational activities for the EMS personnel based on the "experiential learning" methods.

Results 287 patients with suspected chest pain were ambulance-transported and 189 patients received a pre-hospital ECG; 152 patients were transferred to hospital and only 34 had an acute myocardial infarction diagnosis: 13 % of these patients had their ECG transmitted to the CCU. The median time from "call to the EMS" to "arrival to the hospital" was 41 minutes (range 29 - 63).

Discussion Results confirm the advantages of the ECP developed in Rome and Lazio. The Regional Administration plans to expand the utilization of the ECP to all regional emergency network (EMS and Emergency Departments).